

STATE OF SOUTH CAROLINA

(Caption of Case)

BEFORE THE  
PUBLIC SERVICE COMMISSION  
OF SOUTH CAROLINA

COVER LETTER

DOCKET NUMBER: 2015 - 12 A

(Please type or print)

Submitted by: BullsEye Telecom, Inc.  
Address: 25925 Telegraph Road, Suite 210  
Southfield, MI 48033

SC Bar Number:  
Telephone: 248-784-2605  
Fax: 248-784-2501  
Other:  
Email: JHornkohl@bullseyetelecom.com

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

DOCKETING INFORMATION (Check all that apply)

- ☐ Emergency Relief demanded in petition ☐ Request for item to be placed on Commission's Agenda expeditiously
- ☒ Other: Authorized Utility Representative

INDUSTRY (Check one)	NATURE OF ACTION (Check all that Apply)			
<input type="checkbox"/> Electric	<input type="checkbox"/> Affidavit	<input type="checkbox"/> Letter	<input type="checkbox"/> Request	
<input type="checkbox"/> Electric/Gas	<input type="checkbox"/> Agreement	<input type="checkbox"/> Memorandum	<input type="checkbox"/> Request for Certification	
<input type="checkbox"/> Electric/Telecommunications	<input type="checkbox"/> Answer	<input type="checkbox"/> Motion	<input type="checkbox"/> Request for Investigation	
<input type="checkbox"/> Electric/Water	<input type="checkbox"/> Appellate Review	<input type="checkbox"/> Objection	<input type="checkbox"/> Resale Agreement	
<input type="checkbox"/> Electric/Water/Telecom.	<input type="checkbox"/> Application	<input type="checkbox"/> Petition	<input type="checkbox"/> Resale Amendment	
<input type="checkbox"/> Electric/Water/Sewer	<input type="checkbox"/> Brief	<input type="checkbox"/> Petition for Reconsideration	<input type="checkbox"/> Reservation Letter	
<input type="checkbox"/> Gas	<input type="checkbox"/> Certificate	<input type="checkbox"/> Petition for Rulemaking	<input type="checkbox"/> Response	
<input type="checkbox"/> Railroad	<input type="checkbox"/> Comments	<input type="checkbox"/> Petition for Rule to Show Cause	<input type="checkbox"/> Response to Discovery	
<input type="checkbox"/> Sewer	<input type="checkbox"/> Complaint	<input type="checkbox"/> Petition to Intervene	<input type="checkbox"/> Return to Petition	
<input checked="" type="checkbox"/> Telecommunications	<input type="checkbox"/> Consent Order	<input type="checkbox"/> Petition to Intervene Out of Time	<input type="checkbox"/> Stipulation	
<input type="checkbox"/> Transportation	<input type="checkbox"/> Discovery	<input type="checkbox"/> Prefiled Testimony	<input type="checkbox"/> Subpoena	
<input type="checkbox"/> Water	<input type="checkbox"/> Exhibit	<input type="checkbox"/> Promotion	<input type="checkbox"/> Tariff	
<input type="checkbox"/> Water/Sewer	<input type="checkbox"/> Expedited Consideration	<input type="checkbox"/> Proposed Order	<input type="checkbox"/> Other:	
<input type="checkbox"/> Administrative Matter	<input type="checkbox"/> Interconnection Agreement	<input type="checkbox"/> Protest		
<input type="checkbox"/> Other:	<input type="checkbox"/> Interconnection Amendment	<input type="checkbox"/> Publisher's Affidavit		
	<input type="checkbox"/> Late-Filed Exhibit	<input checked="" type="checkbox"/> Report		



March 23, 2015  
Via Overnight Delivery

2600 Maitland Center Pkwy.  
Suite 300  
Maitland, FL 32751  
P.O. Drawer 200  
Winter Park, FL  
32790-0200  
Tel: 407-740-8575  
Fax: 407-740-0613  
www.tminc.com

Clerk's Office  
South Carolina Public Service Commission  
101 Executive Center Dr.  
Columbia, SC 29210

RE: BullsEye Telecom, Inc  
SC Authorized Utility Representative

Dear Sir or Madam:

Enclosed please find a copy of the SC Authorized Utility Representative , filed on behalf of BullsEye Telecom, Inc. No check is enclosed as there are no remittance fees due.

Questions regarding this filing should be directed to my attention at 407-740-8575. Thank you for your assistance in this matter.

Sincerely,

Tammie King  
Compliance Reporting Specialist

file: BullsEye Telecom, Inc - Reporting - South Carolina

TK/ab

# AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS

TYPE:    ☒ IXC    ☒ CLEC    ☐ ILEC    ☐ Wireless

## CERTIFICATED COMPANY INFORMATION

BullsEye Telecom, Inc.

Company Name

FEIN/SSN

248-784-2500

Dba/fka

Telephone #

25925 Telegraph Road, Suite 210

Mailing Address

Southfield, MI 48033

City, State, Zip Code

25925 Telegraph Road, Suite 210

Business Location

Southfield, MI 48033

City, State, Zip Code

County

## REGISTERED AGENT INFORMATION

Registered Agent: National Registered Agents, Inc.

Mailing Address: 2 Office Park Court, Suite 103

City, State, Zip Code: Columbia, SC 29223

**Pursuant to the Commission's rules and regulations, print or type company contact for the following areas:**

Joy Hornkohl

**A. General Manager** (Include Address if different than above)

248-784-2605

/ 248-784-2501

/ JHornkohl@bullseyetelecom.com

Telephone Number

/ Facsimile Number

/ E-mail Address

Rosemary Albanese

**B. Customer Relations/Complaints Representative** (Include Address if different than above)

248-784-2511

/ 248-968-1117

/ ralbanese@bullseyetelecom.com

Telephone Number

/ Facsimile Number

/ E-mail Address

Rosemary Albanese

**C1. Customer Relations/Complaints Representative for Escalated Complaints** (Include Address if different than above)

248-784-2511

/ 248-968-1117

/ ralbanese@bullseyetelecom.com

Telephone Number

/ Facsimile Number

/ E-mail Address

877-638-2855

**C2. Customer Contact** (Toll Free Number)

Thomas F. Tisko

**D. Engineering Operations** (Include address if different than above)

248-784-2500

/ 248-784-2501

/ ttisko@bullseyetelecom.com

Telephone Number

/ Facsimile Number

/ E-mail Address

**E. Test and Repair** (Include address if different than above)

248-784-2500

/ 248-784-2501

/ ttisko@bullseyetelecom.com

Telephone Number

/ Facsimile Number

/ E-mail Address

Thomas F. Tisko

**F. Emergencies** (During Non-Office Hours)

248-784-2500

/ 248-784-2501

/ ttisko@bullseyetelecom.com

Telephone Number

/ Facsimile Number

/ E-mail Address

**In addition, please provide the following company contact information to assist in proper routing of correspondence and invoices:**

	<b>David Bailey</b>	<b>VP Business Development</b>
G.	<b>Regulatory Officer</b> (Name & Title) 25925 Telegraph Road, Suite 210, Southfield, MI 48033 (Mailing Address) 248-784-2544 / 248-784-2501 / dbailey@bullseyetelecom.com Telephone Number / Facsimile Number / E-mail Address	
	<b>Tammie King</b>	<b>Compliance Reporting Specialist</b>
H.	<b>Annual Report Mailings</b> (Name & Title) P.O. Drawer 200, Winter Park, FL 32790-0200 (Mailing Address) 407-740-8575 407-740-0613 tking@tminc.com Telephone Number / Facsimile Number / E-mail Address	
	<b>Tammie King</b>	
I.	<b>Dual Party Mailings</b> (Name & Title) P.O. Drawer 200, Winter Park, FL 32790-0200 (Mailing Address) 407-740-8575 / 407-740-0613 / tking@tminc.com Telephone Number / Facsimile Number / E-mail Address	
	<b>Tammie King</b>	<b>Compliance Reporting Specialist</b>
J.	<b>Interim LEC Fund Mailings</b> (Name & Title) P.O. Drawer 200, Winter Park, FL 32790-0200 (Mailing Address) 407-740-8575 / 407-740-0613 / tking@tminc.com Telephone Number / Facsimile Number / E-mail Address	
	<b>Tammie King</b>	<b>Compliance Reporting Specialist</b>
K.	<b>Universal Service Fund Mailings</b> (Name & Title) P.O. Drawer 200, Winter Park, FL 32790-0200 (Mailing Address) 407-740-8575 / 407-740-0613 / tking@tminc.com Telephone Number / Facsimile Number / E-mail Address	
	<b>Tammie King</b>	<b>Compliance Reporting Specialist</b>
L.	<b>Gross Receipts Mailings</b> (Name & Title) P.O. Drawer 200, Winter Park, FL 32790-0200 (Mailing Address) 407-740-8575 / 407-740-0613 / tking@tminc.com Telephone Number / Facsimile Number / E-mail Address	
	<b>Tammie King</b>	<b>Compliance Reporting Specialist</b>
M.	<b>Lifeline Mailings</b> (Name & Title) P.O. Drawer 200, Winter Park, FL 32790-0200 (Mailing Address) 407-740-8575 / 407-740-0613 / tking@tminc.com Telephone Number / Facsimile Number / E-mail Address	

*SHARON R. WARREN*  
This form was completed by

*Sharon R. Warren*  
Signature

*3-19-15*  
Date

TECHNOLOGIES MANAGEMENT INC.  
Title AS ATTORNEY-IN-FACT  
BY SHARON R. WARREN, CONSULTANT

RETURN COMPLETED FORM TO: Public Service Commission of SC  
Docketing Department  
Post Office Drawer 11649  
Columbia, South Carolina 29211

**And**

Office of Regulatory Staff  
Attn: Jeanne Gordon  
1401 Main Street, Suite 900  
Columbia, South Carolina 29201